

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Steven Webster et al.

Assignee: Amkor Technology, Inc.

Title: OPTICAL MODULE WITH LENS INTEGRAL HOLDER

FABRICATION METHOD

Serial No.: 09/764,196

Filed:

January 16, 2001

Examiner:

Timothy V. Eley

Group Art

3724

Unit:

Docket No.:

G0045M

Monterey, CA September 28, 2004

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 RECEIVED OCT 0 8 2004

TECHNOLOGY CENTER R3700

## <u>UNDER §1.97(c) WITH FEE</u>

Sir:

Pursuant to 37 C.F.R. §§ 1.56, 1.97 and 1.98, Applicant(s) wish to call the following document (a copy is enclosed) to the attention of the Examiner.

## U.S. PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	NAME
1)	)	6,767,753	07/27/04	Huang

A PTO form 1449 listing this document is enclosed.

Citation of the above documents shall not be construed as:

- 1. an admission that the document is necessarily prior art with respect to the instant invention;
- a representation that a search has been made,
   other than as described above; or
- 3. an admission that the information cited herein is, or is considered to be, material to patentability as defined in § 1.56(b).

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Serial No. 09/764,196

Enclosed herewith is a check that includes the amount of \$180.00 payable to the Director of the United States Patent and Trademark Office, which is the amount for submission of an Information Disclosure Statement given in 37 C.F.R. § 1.17(p).

The Commissioner is hereby authorized to charge any additional fees, which may be required to consider this paper, or credit any overpayment to Deposit Account No. 50-0553.

**CERTIFICATE OF MAILING** 

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, NO. Box 1450, Alexandria, VA 22313-1450, on September 28, 2004.

September 28, 2004 Date of Signature

Respectfully submitted,

Serge J. Hodgson

Attorney for Applicant(s)

Req. Nol. 40,017 (831) 655-0880

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EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME		CLASS	SUBCLAS		FILING DATE IF APPROPRIATE			
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant(s).												